

Wisconsin Uniform Placement Criteria (WI-UPC)

WI-UPC is a standardized set of criteria that matches the substance abuse client's severity of illness with the intensity of their recommended service need to produce a placement recommendation.

- Patient placement recommendations are determined by evaluating five dimensions of a client's condition or status. These dimensions are:
 - Withdrawal Potential.
 - Physical/Mental Health Condition(s) and/or Complication(s).
 - Emotional/Behavioral Condition(s) and/or Complication(s).
 - Relapse Potential.
 - Recovery Environment.
- On August 1, 2000 HFS 75, Community Substance Abuse Service Standards, went into effect requiring the use of either the WI-UPC or American Society of Addiction Medicine (ASAM) in initial placement, continued stay, transfer between levels of care, and discharge from treatment for individuals served by Wisconsin certified substance use disorder treatment providers. Additionally, the Assets and Needs Criteria should be reviewed on a regular basis, in accordance with HFS 75.
- Appropriate placement recommendation is determined by matching individual client characteristics within each of these dimensions with the frequency and intensity of services needed as indicated by the client's symptoms. The WI-UPC Scoring Instrument is used for initial placement while the Assets and Needs Criteria outlined for each level of care is used to determine continued stay, level of care transfer or discharge.
- Although the Criteria produces a recommendation for the appropriate level of care placement for a client, guidelines are included to help identify the need for an alternative recommendation if individual circumstances warrant. The key is that an initial recommendation is made based upon the individual client's condition, and while variance is certainly allowed, the criteria outlines the most significant needs for the client and requires case management around those issues regardless of the level of care placement. Example of such circumstances may include;
 - Additional assets within the community.
 - Limited or no funding for the recommended level of care.
 - Logistical inhibitors to the level of care recommended, such as transportation or childcare needs.
- There are a variety of advantages associated with WI-UPC, including the following:
 - Development of a common language that describes the multidimensional assessment processes and identifies the core components of the continuum of care. This enables clinicians, clients and payers to discuss treatment planning, utilizing a common language with uniform definitions of levels of care.
 - WI-UPC has led to the adoption of uniform definitions, common standards of program admission, continued stay and discharge criteria in order to standardize a statewide system of care. This process offers a framework applicable to both public and private treatment and payer systems.
 - WI-UPC provides a guideline that focuses upon the least intrusive and least restrictive form of treatment based upon the client's individual needs as identified within standardized criteria.
 - WI-UPC will lead to the standardized collection of data, which will be useful in the development of evaluation studies to assess the efficacy of placement and treatment outcome.